



Year 2005

Air Quality Division

*ANNUAL AIR EMISSIONS INVENTORY QUESTIONNAIRE
For Minor Sources*

INSTRUCTIONS

The 2005 Annual Emissions Inventory Questionnaire includes 4 forms that are required to be completed and submitted to the Air Quality Division. Instructions for each form are included below. Upon completion, submit the forms along with the signature by the Responsible Official of the facility within 90 days of receipt of a letter from the Department.

FORM 1: Facility General Information

SECTION I thru III: Complete all fields as requested.

FORM 2: Equipment, Stack & Location Data

Equipment Data: List all of the permitted equipment operated. Indicate, if not available.
Stack Data: Provide the details of each stack.
Location Data: If the portable equipment was moved from one location to another, list the dates, the counties, latitude and longitude or address/driving directions.

FORM 3: Emissions Data – Point & Fugitive Emissions

Enter the equipment id, annual process rate or design capacity, hours of operation, pollutants, control device and control efficiency, emission factor, emission factor reference (AP-42 11.2.3 1997) and actual emissions totals. If the hours of operation are unknown, enter 8760 as the worst case estimates.

FORM 4: Summary

Summarize all of the emissions by each pollutant and enter the total value. All reports submitted to the Department should be certified true and accurate by the responsible official of the facility. This person is the owner or operator of the facility. **If there is a change of the Responsible Official of the facility, please notify the Department with an additional letter stating the change.**

The completed questionnaire should be submitted to the following address:

**Arizona Department of Environmental Quality
Attention: Darlene Celaya, Emissions Inventory Team
Air Quality Division, Compliance Section 3415A-3
1110 West Washington Street
Phoenix, AZ 85007**

If you have any question or have difficulty completing this form, please contact Darlene Celaya at (602) 771 7662.

FORM 1: FACILITY GENERAL INFORMATION**Year: 2005****SECTION I: *Plant Identification & Mailing Information***

Customer Name: _____

Place Name: _____

Place ID: _____

Mailing Address: _____

City: _____

State: _____

ZIP: _____

County: _____

Phone: _____

Fax: _____

Permit #/LTF #: _____

Facility Type: _____

SECTION II: *EI Contact*

EI Contact Name: _____

Title: _____

Telephone: _____

Fax: _____

SECTION III: *Confidential Request*

Pursuant to Arizona Revised Statutes §49-432 and §49-201, do you claim the Emissions Inventory data submittal confidential. If yes, include which portions of the inventory are confidential along with a brief explanation:

Yes_____
No

FORM 2: EQUIPMENT, STACK & LOCATION DATA**Year: 2005****Equipment Data**

Equipment Type	Equipment ID	Design Capacity & Units	Hours of Operation	Control Device

Stack Information

	Stack #1	Stack #2	Stack #3	Stack #4
Equipment Name				
Height (feet)				
Diameter (feet)				
Velocity (feet/second)				
Exhaust Gas Temperature (F)				
Flow Rate (actual cubic feet per minute)				

Date		County of Operation	Latitude	Longitude	Address/Driving Directions
From	To				

FORM 3: EMISSIONS DATA**Year 2005**

Equip. ID	Annual Process Rate or Design Capacity	Units	Hours of Operation (hours/year)	Pollutant	Pollutant Control Device	Control Efficiency (%)	Emission Factor	Units	Emission Factor Reference	Actual Emissions (tons/year)

****Please attach a sample calculation for each process pollutant. If using emission factor other than AP-42, include a detailed explanation and supporting documentation where the emission factor was obtained from.

FORM 4: SUMMARY & CERTIFICATION**Year: 2005****Summary** - Total all the emissions for each pollutant and enter in the table below

Pollutant	Tonnage (tons per year)
Particulate Matter (PM)	
Particulate Matter less than 10 microns (PM10)	
Nitrogen Oxides (NOx)	
Sulfur Oxides (SOx)	
Volatile Organic Compounds (VOC)	
Carbon Monoxide (CO)	
Lead (Pb)	
Hazard Air Pollutants (HAPs)	

Certification of Truth & Accuracy

I certify that I have knowledge of the facts set forth in this questionnaire, and that the same are true, accurate and complete to the best of my knowledge and belief, and that all information not identified by me as confidential in nature shall be treated by the Arizona Department of Environmental Quality as public record.

Signature of Responsible

Official:

Date:

Print Name:

Title: